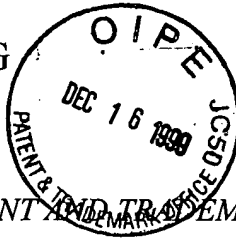


BARNES & THORNBURG



FILE COPY

600 One Summit Square
Fort Wayne, Indiana 46802
(219) 423-9440

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group: 2761

Attorney

Docket No.: 37168/82045

Applicant: Jeffery K. Dellinger et al.

Invention: METHOD AND APPARATUS FOR PROVIDING
RETIREMENT INCOME BENEFITS

Serial No: 09/406,290

Filed: September 24, 1999

Examiner: Unknown

Certificate Under 37 CFR 1.8(a)

I hereby certify that this correspondence is being
deposited with the United States Postal Service as first
class mail in an envelope addressed to: Assistant
Commissioner for Patents, Washington, D.C. 20231

on December 13, 1999

Bobby B. Gillenwater

LETTER REQUESTING CORRECTION OF FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Attached please find a copy of the Official Filing Receipt in connection with the above-identified application. It is noted that the Official Filing Receipt fails to make reference to a second Provisional Patent Application No. 60/115,570 filed January 12, 1999, to which applicant is claiming priority under 35 U.S.C. §120.

Enclosed is a copy of the Declaration and Power of Attorney showing the priority information.

Accordingly, it is respectfully requested that a corrected Filing Receipt be issued indicating this change.

Respectfully submitted,

Bobby B. Gillenwater
Reg. No. 31,105
(219) 423-9440

BBG:rsb
Enclosures
FWDS01 RSK 106277

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JAN 27 2000
TECH CENTER 2700

SERIAL NUMBER 09/406,290	FILING DATE 09/24/99	CLASS 705	GROUP ART UNIT 2761	ATTORNEY DOCKET NO. 37168/82045
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APPLICANT

JEFFREY K. DELLINGER, FORT WAYNE, IN.

****CONTINUING DOMESTIC DATA*******
 VERIFIED PROVISIONAL APPLICATION NO. 60/101,883 09/25/98 *verified*
 PROVISIONAL APPLICATION NO. 60/115,570 01/12/99 *CRB*

****371 (NAT'L STAGE) DATA*******
 VERIFIED *none*
CRB

****FOREIGN APPLICATIONS*******
 VERIFIED *none*
CRB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/15/99

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IN	SHEETS DRAWING 15	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
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Verified and Acknowledged *CRB* *CRB*
Examiner's Initials Initials

ADDRESS

BARNES & THORNBURG
 600 ONE SUMMIT SQUARE
 FORT WAYNE IN 46802

TITLE

METHOD AND APPARATUS FOR PROVIDING RETIREMENT INCOME BENEFITS

FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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